

01-03-02

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# UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No. V201-0018 (15774)

First Inventor or Application Identifier Henry Francis Blind et al.

Title AUDIO AMPLIFIER WITH VOLTAGE LIMITING RESPONSE TO SPECTRAL  
CONTENT

Express Mail Label No. EL 588510614 US

## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents

ADDRESS TO: Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

- ☒ \*Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original, and a duplicate for fee processing)
2. ☐ Applicant claims small entity status.  
(See 37 CFR 1.27)
3. ☒ Specification [Total Pages 20]  
(preferred arrangement set forth below)
- Descriptive title of the Invention
- Cross References to Related Applications
- Statement Regarding Fed sponsored R&D
- Reference to sequence listing, a table, or a computer program listing appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure
4. ☒ Drawing(s) (35 USC 113) [Total Sheets 5]
5. Oath or Declaration [Total Pages 2]
- a. ☒ Newly executed (original or copy)
- b. ☐ Copy from a prior application (37 CFR 1.63(d))  
(for continuation/divisional with Box 18 completed)  
[Note Box 5 below]
- DELETION OF INVENTORS
- i. ☐ Signed statement attached deleting inventor(s) named in the prior application, see CFR §§ 1.63(d)(2) and 1.33(b).
6. ☐ Application Data Sheet. See 37 CFR 1.76

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. ☐ Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
- a. ☐ Computer Readable Form (CRF)
- b. Specification Sequence Listing on:
- i. ☐ CD-ROM or CD-R (2 copies); or
- ii. ☐ Paper
- c. ☐ Statement verifying identity of above copies

## ACCOMPANYING APPLICATION PARTS

9. ☐ Assignment Papers (cover sheet & documents)
10. ☐ 37 CFR §3.73(b) Statement ☒ Power of Attorney  
(when there is an assignee)
11. ☐ English Translation Document (if applicable).
12. ☒ Information Disclosure Statement (IDS)/PTO-1449 ☒ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
16. ☐ Request and Certificate under 35 U.S.C. 122(b)(2)(B)(i).  
Applicant must attach Form PTO/SB/35 or its equivalent
17. ☐ Other: \_\_\_\_\_

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)

of prior Application No. \_\_\_\_\_ /

Prior application information: Examiner \_\_\_\_\_

Group/Art Unit \_\_\_\_\_

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

## 19. CORRESPONDENCE ADDRESS

☒ Customer Number or Bar Code Labelor ☐ Correspondence address below

27378

PATENT TRADEMARK OFFICE

Name	Mark L. Mollon, Esq.		
Address			
City		Zip Code	
Country	Telephone	734/542-0900	Fax 734/542-9569
Name (print/type)	Mark L. Mollon		Registration No. (Attorney/Agent) 31,123
Signature			Date 12/19/01

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231  
c:\2072\15774.sb05.doc

## Certificate of Mailing by Express Mail

"Express Mail" Mailing Label No. EL 588510614 US Date of Deposit December 19, 2001. I hereby certify that this paper or fee is being deposited in the United States "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Assistant Commissioner for Patents, Washington, DC 20231.

Terri L. Fox

# FEE TRANSMITTAL

## For FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 740 )

### Complete if known

Application Number  
Filing Date  
First Named Inventor Henry Francis Blind  
Examiner Name  
Group/Art Unit  
Attorney Docket No. V201-0018 (15774)

### METHOD OF PAYMENT (check one)

1. ☒ The commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit  
Acct. No. 50-0567  
Deposit  
Acct. Name MacMillan, Sobanski, & Todd, LLC

- ☐ Charge Any Additional Fee Required  
Under 37 CFR 1.16 and 1.17  
☐ Applicant claims small entity status  
See 37 CFR 1.27

2. ☐ Payment Enclosed:

☒ Check ☐ Credit Card ☐ Money Order ☐ Other

### FEE CALCULATION

#### 1. FILING FEE

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
101	740	201	370	Utility filing fee	740
102	330	206	165	Design filing fee	
107	510	207	255	Plant filing fee	
108	740	208	370	Reissue filing fee	
114	160	214	80	Provisional filing fee	
<b>SUBTOTAL (1)</b>					<b>\$ 740</b>

#### 2. CLAIMS

Total Claims	Extra	Below	Fee Paid
18	20** =	18/9 =	0
Independent Claims	2	3** =	84/42 = 0
Multiple Dependent			= 280/140

\*\*or # previously paid, if greater; for Reissues, see below

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	84	202	42	Independent claims in excess of 3
104	280	204	140	Multiple dependent claim, if not paid
109	84	209	42	**Reissue independent claims over original patent
110	18	210	9	**Reissue claims in excess of 20 and over original patent
<b>SUBTOTAL (2)</b>				

\*\* or number previously paid, if greater; for Reissues, see above

### FEE CALCULATION (continued)

#### 3. ADDITIONAL FEES

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting a publication of SIR after Examiner action	
115	110	215	55	Extension for reply within 1 <sup>st</sup> month	
116	400	216	200	Extension for reply within 2 <sup>nd</sup> month	
117	920	217	460	Extension for reply within 3 <sup>rd</sup> month	
118	1,440	218	720	Extension for reply within 4 <sup>th</sup> month	
128	1,960	228	980	Extension for reply within 5 <sup>th</sup> month	
119	320	219	160	Notice of Appeal	
120	320	220	160	Filing a brief in support of an appeal	
121	280	221	140	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,280	241	640	Petition to revive - unintentional	
142	1,280	242	640	Utility issue fee (or reissue)	
143	460	243	230	Design issue fee	
144	620	244	310	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Petitions related to provisional applications	
126	180	126	180	Submission of Information Disclosure Statement	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	740	246	370	Filing a submission after final rejection (37 CFR 1.129(a))	
149	740	249	370	For each additional invention to be examined (37 CFR 1.129(b))	
179	740	279	370	Request for Continued Examination	
169	900	169	900	Request for expedited examination of a design application	

Other fee (specify) \_\_\_\_\_

\*Reduced by Basic Filing Fee Paid

**SUBTOTAL (3)** \$ 0

### SUBMITTED BY

Typed or Printed Name	Complete (if applicable)
Mark L. Mollon	Reg. No. 31,123
Signature <i>Mark L. Mollon</i>	Deposit Account
Date 12/19/01	User ID

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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